

Bervie School Nursery Day Care of Children

Bervie School
Church Street
Inverbervie
Montrose
DD10 0RU

Telephone: 01561400685

Type of inspection:
Unannounced

Completed on:
2 July 2024

Service provided by:
Aberdeenshire Council

Service provider number:
SP2003000029

Service no:
CS2003016310

About the service

Bervie School Nursery is registered to provide a care service to a maximum of 64 children at any one time, from two years to an age to attend primary school, of whom no more than 10 may be aged two to three years. The service is based within Bervie Primary School and is provided by Aberdeenshire council. The setting consists of a large playroom and an enclosed outdoor area. The service is within easy access to the local amenities such as shops, library, woodland area and parks.

About the inspection

This was an unannounced inspection which took place on 1 July 2024 between 09:15 and 18:00 and 2 July 2024 between 09:15 and 16:00. One inspector from the Care Inspectorate carried out the inspection.

To prepare for inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- observed children using the service
- received feedback from families
- spoke with the staff and management team
- observed practice
- reviewed documents.

Key messages

- Children were happy, confident and settled.
- Staff knew children well and personal planning processes helped identify and plan how children's needs are met.
- Children benefitted from relaxed, unhurried mealtimes that supported their independence and communication skills.
- Children were seen to be leading their own play and learning.
- Daily access to fresh air and outdoor experiences supported children's health and wellbeing.
- Effective staff deployment helped ensure children were well supervised and supported.
- Planning and observation cycles are under review and should be further developed to ensure high quality outcomes for children.
- The management team should continue to strengthen the quality assurance system to ensure identified next steps are followed up.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How good is our care, play and learning?	4 - Good
How good is our setting?	5 - Very Good
How good is our leadership?	4 - Good
How good is our staff team?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How good is our care, play and learning?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality Indicator 1.1: Nurturing Care and Support

Children benefitted from warm, caring and nurturing approaches from staff. Children were seen approaching staff for cuddles, reassurance and support. Staff were skilled at recognising when intervention was required, for example, a child had been keen to change their own socks. A staff member allowed them to try and offered assistance whilst still supporting the child to be independent. A parent told us, "The staff on the floor are amazing, kind, and caring. Me and my child have built strong relationships with them, and they treat my child with care and dignity." Another commented, "The day-to-day staff are lovely. Majority of them know my child well enough to know how to help them go into nursery with an activity to do and show a genuine interest into what my child has been up to."

All children benefitted from the use of effective personal planning processes. These gathered relevant, quality information which was used to meet their individual care needs. Staff were knowledgeable about individual children's needs and strategies in place to support them. Personal plans were reviewed and signed by parents at least every six months. However, not all parents agreed that they are fully involved in their child's care, including developing and reviewing their personal plan.

Mealtimes were a strength of the service. Children experienced relaxed, social, and unhurried mealtimes, offering very good opportunities to practice a range of life skills. Food choices were plentiful and healthy. Snack helpers were fully involved in the preparation of the tables and equipment, offering opportunities to practice counting and solve problems. All children benefitted from good opportunities to be independent, for example, serving their own food and drinks, clearing, and washing their plates when finished. Staff sat at tables and ate with children supporting good turn taking, modelling language and conversation. As a result, children were relaxed, chatty and enjoyed a healthy lunch whilst being effectively supervised.

Systems for recording medication were in place, including parental permissions, storage information and records of administration. Medications were stored appropriately, and staff were confident in discussing children's medical needs. We asked the service to ensure all information gathered is correct, for example, expiry dates on the paperwork match the medication being stored. Audits were in place to ensure all medication was in date and long-term medications were replaced in a timely manner. This helped ensure children's medical needs were safely met.

Intimate care procedures were mainly respectful of children's privacy and dignity. We suggested the door could be closed to further support children's dignity at all times. Staff were respectful of children's rights and asked for the child's permission before carrying out tasks, speaking to the child throughout the procedure. Children were encouraged to be as independent as possible. This promoted a nurturing, rights respecting experience that allowed children to develop life skills.

Quality Indicator 1.3: Play and Learning

Children were happy, having fun and fully engaged in their play. The environment was developmentally appropriate and supported free flow which meant children could choose to play indoors or outside. Children

were able to lead their own play, learning through the wide variety of resources and spaces. Staff laughed with children and enjoyed their time together as they explored and learned. As a result, children were interested and focused on meaningful play.

Skilled staff supported children to develop their skills in language, literacy, and numeracy. Children benefitted from a range of accessible resources, for example, old phones, mark making materials and magazines in the home corner. Further opportunities were woven into everyday experiences, such as reading stories, singing songs, use of MAKATON and modelling language. As a result, children were supported to investigate and develop their language, literacy and numeracy skills.

Approaches to planning for children's learning were in the early stages of development. Staff were using intentional planning process to plan experiences for the term. Mind maps were being used to record what children had been playing with. We suggested these could be evaluated to consider how this information is used to inform the environment, resources and future plans supporting children's current interests. Floorbooks were being used to record some of the children's learning and experiences, however, incomplete entries made it difficult to follow and did not allow children to revisit learning experiences. We suggested further training may support the staff to build confidence and engage more consistently with floorbooks.

Observations of children's learning were mainly well written, however, we found some children did not have next steps in place. This would help ensure children are challenged and supported to learn at a pace that is right for them. The service had identified this and were working to develop a consistent approach to recording and actioning children's next steps. Parents comments included, "Would be nice to see more pictures from their days" and "I often do not know what is going on learning and development wise with my child." The service shared that they are in the early stages of moving children's observations to an online platform. This would further support the sharing of children's learning and experiences with families.

Opportunities for play and learning were enhanced through strong connections to their community. The service had established regular visits with a local care service providing adults and children with opportunities to strengthen intergenerational links. Children benefitted from trips to the local beach, community garden and shops. This supported children to be active and healthy as well as learn more about their local environment and sense of place.

How good is our setting?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore, we evaluated this key question as very good.

Quality Indicator 2.2: Children experience high quality facilities

The setting benefitted from natural light, good ventilation and quality furnishings. There was scope for more soft furnishings to be added to make some of the spaces more cosy, comfortable and homely. There was ample space indoors and outdoors for children to play and explore together or alone. Children's artwork and drawings were displayed around the setting, giving them the strong message that they matter.

Children benefitted from a well-resourced and carefully considered environment. Resources were developmentally appropriate, offering children choice and opportunities to be independent, for example, art area offered children a selection of materials, resources and implements to freely choose from. This allowed children freedom of choice and self-expression. Free access to a well-resourced environment promoted children's independence and choice, allowing them to lead their own play.

Children benefitted from free flow access to a large, fully enclosed garden. This space offered opportunities for a range of different types of play, for example, climbing, running, digging and imaginary play. Children were seen to be transporting mud and water from the mud kitchen to other areas of the garden to enhance their play. As a result, children were seen to be engaged and having fun. A parent commented, "Lots of outdoor play, painting, water play, role play and outings to Castle Lodge which I think is lovely." Another commented, "Gets to play outside lots and can always do some kind of messy play."

Infection control practices helped minimise the potential spread of infection, for example, children were seen to be confident in their hand washing routines, before eating and after using the bathroom. A range of risk assessments were in place and implemented by staff to help ensure that the environment was safe for the children attending. Risk assessments were regularly reviewed, and staff had a good understanding of most of the potential risks in the environment. To further support children to be safe, we suggested some risk assessments could be updated to fully reflect staff's knowledge. Children's personal information was stored securely ensuring families privacy and confidentiality was respected. As a result, children were safe and well protected.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

Quality Indicator 3.1: Quality assurances and improvements are well led

The service vision, values and aims were positive, shared with the team and evident within the setting. The service shared the vision, values and aims of the school and the senior management team shared plans to develop these to be more specific to the nursery. We suggested when reviewing these in future, the service should consult with the children and families, supporting them to feel valued and included.

Family engagement had been a recent, significant focus. We saw opportunities for families to be involved in the service in the form of stay and plays, baking, planting and reading stories. Parents were offered opportunities to share their views and opinions in the form of questionnaires and informal questions. Not all parents agreed with the statement, 'My child and I are involved in a meaningful way to help develop the service' and one commented, "Not had an involvement yet but would like to." We suggested information gathered in the questionnaires could be linked to the nursery improvement plans. This would help ensure feedback was meaningful and further supporting positive outcomes for children and families.

Positive outcomes for children were promoted by quality assurance practices, including regular auditing and monitoring of staff practice. We discussed how these could be further improved by revisiting findings from audits to ensure they are supporting the development of practice and promoting positive outcomes for children. For example, a learning walk audit had identified areas for improvement which had been shared with staff, however, it was not evident how these would be developed in practice. Staff were involved in self-evaluation processes and were reflecting on aspects of service delivery relevant to their current situation and challenges experienced. This helped ensure improvements planned were relevant to the needs of the service, children and families. Planned improvements included curriculum planning, review of vision values and aims and partnership working with parents.

How good is our staff team?**5 - Very Good**

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children, therefore, we evaluated this key question as very good.

Quality Indicator 4.3: staff deployment

Staff demonstrated kindness, love and interest to the children in their care. Children benefitted from a staff team who knew them well and supported their needs. This resulted in confident and happy children. A parent commented, "They're always very friendly and helpful. I feel very comfortable leaving my child with them."

The deployment of staff was managed well and effective to meet children's needs. The leadership team had recognised additional staff were needed to support the current needs of children and additional staffing had been sought from the local authority. This supported children's health and wellbeing and ensured they were safe. A parent commented, "There are always a few staff there when I am and never an amount of children that it feels too busy. On the one day I've seen it busy (sports day) there were more staff."

Children benefitted from a staff team that communicated and worked well with each other. They had a clear understanding of each other's roles and responsibilities and deployed themselves effectively to ensure children were supported. Staff breaks were managed without disruption to children's care and learning. This ensured staff's wellbeing was considered. Staff sat with children and supported their learning, creating a relaxed atmosphere that meant children's learning styles could be supported. As a result, children's sense of security and overall wellbeing was promoted.

The leadership team were passionate about the service and engaged well throughout the inspection process. Children benefitted from a committed staff team who told us they felt well supported by management and were happy to seek advice and guidance. Staff benefitted from regular meetings with management, offering them opportunity to highlight what is going well and areas for improvement or support. This resulted in staff having goals to support their development and practice. We suggested that goals could be more specific and targeted to support meaningful development.

All staff had accessed basic training and a range of other training opportunities. Some staff were formally reflecting on their training and how this had impacted service delivery. We suggested these could be revisited after a three to six-month period to evaluate the long-term impact of training. Staff confidently discussed training opportunities accessed and further training plans. This meant that children benefitted from a staff team with a mix of skills, knowledge and were keen to develop their skills and learning.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To support children's health and wellbeing the provider should ensure any recorded information relating to medication is up to date, includes all the necessary information and reflects children's current needs. Information should be reviewed every three months or when there are any changes.

Management of medication in day care of children and childminding services:

<https://hub.careinspectorate.com/media/1549/management-of-medication-in-daycare-of-children-and-childminding.pdf>

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

This area for improvement was made on 20 April 2022.

Action taken since then

Permission to administer forms for medication contain the relevant information to support the staff team to ensure children's medical needs can be safely met. Medication administered is recorded effectively and shared with families. Medication stored in the service is reviewed every three months with families. A medication audit is in place to ensure paperwork is completed effectively and medication is in date, supporting the staff team to ensure medical needs are being effectively managed.

This area for improvement has been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How good is our care, play and learning?	4 - Good
1.1 Nurturing care and support	5 - Very Good
1.3 Play and learning	4 - Good
How good is our setting?	5 - Very Good
2.2 Children experience high quality facilities	5 - Very Good
How good is our leadership?	4 - Good
3.1 Quality assurance and improvement are led well	4 - Good
How good is our staff team?	5 - Very Good
4.3 Staff deployment	5 - Very Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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